



STATE OF NEW JERSEY
DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER QUALITY

DETERMINATION OF ENVIRONMENTAL BENEFIT APPLICATION

— Refer to Instructions on Page 4 and Provide All Applicable Information. Please Print or Type. —

1. APPLICANT

Name _____ Telephone () _____

Permanent Legal
Address _____

City or Town _____ State _____ Zip Code _____

2. PROJECT DESCRIPTION (Brief Description of Effluent Reuse Project)

3. LOCATION OF WASTEWATER TREATMENT FACILITY (From Which the Effluent Will Originate)

Name of Facility/Site _____

Street Address/Location _____

Lot No. _____ Block No. _____

City or Town _____ State _____ Zip Code _____

Municipality _____ County _____

(If more than one wastewater treatment facility, please attach list to this application)

4. LOCATION OF INDUSTRIAL FACILITY (At Which the Further Treated Effluent Will Be Reused)

Name of Facility/Site _____

Street Address/Location _____

Lot No. _____ Block No. _____

City or Town _____ State _____ Zip Code _____

Municipality _____ County _____

(If more than one industrial facility, please attach list to this application)

5. OTHER REQUIRED PERMITS/APPROVALS

If any of the following approvals have been issued for this project, provide the applicable information.

Permit/Approval Type	Permit/Approval No.	Approval Date
● Treatment Works Approval	_____	_____
● Exemption From Sewer Ban	_____	_____
● Water Quality Management Plan Amendment	_____	_____
● CAFRA	_____	_____
● Stream Encroachment	_____	_____
● Freshwater Wetlands	_____	_____
● Tidal or Coastal Wetlands	_____	_____
● Waterfront Development	_____	_____
● NJPDES (DSW, DGW or SIU)	_____	_____
● Pinelands Certificate	_____	_____
● Delaware & Raritan Canal Commission	_____	_____
● Delaware River Basin Commission Docket Approval	_____	_____
● Other Related Approvals	_____	_____

6. DATE OR ANTICIPATED DATE OF PURCHASE OF TREATMENT EQUIPMENT OR CONVEYANCE EQUIPMENT

7. REQUIRED ADDITIONAL INFORMATION (in accordance with N.J.A.C. 7:14D-2.1)

Is the following information submitted with this application?	YES	NO
1. A report describing each specific industrial process for which the further treated effluent is or will be reused, including the following: <ol style="list-style-type: none"> The physical and functional aspects of the treatment equipment or conveyance equipment; The location of any site at which the wastewater that results from the reuse of the further treated effluent is or will be discharged; The volume of the further treated effluent, including the daily average and maximum flow rates, that is or will be reused; The volume of further treated effluent that is or will be consumed in the reuse process; and The volume of wastewater that is or will be discharged thereafter. 		
2. A line item breakdown showing the cost of each component of the treatment equipment or conveyance equipment for which this Determination is sought.		
3. If applicable, a copy of the agreements governing the wastewater treatment facility's supply and the industrial facility's use of the effluent.		
4. A description of the impacts and benefits to the waters of the State resulting from the reuse of the further treated effluent in the industrial process. The description shall, at a minimum, demonstrate that: <ol style="list-style-type: none"> The reuse will not cause a violation of any minimum passing flow restrictions applicable in the waterbody to which the effluent would otherwise have been discharged; If the reuse will result in an interbasin transfer (that is, if the ultimate discharge of the wastewater is to a watershed other than the one to which the effluent would have been discharged if it were not reused), then such interbasin transfer will not have an adverse impact on the water resources in the affected watersheds; The pollutant load to the receiving waterbody to which the effluent would have been discharged if it were not reused is or will not be increased as a result of the reuse; and The water resources of the State are or will be conserved as a result of the reuse. 		

8. CERTIFICATION BY APPLICANT (Responsible Official)

I certify, under penalty of law, that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete.

I certify that the treatment equipment is or will be used exclusively to treat effluent from a wastewater treatment facility, which effluent would otherwise have been legally discharged to the waters of the State, for purposes of reuse in an industrial process. I certify that the conveyance equipment is or will be used exclusively to transport effluent to the facility in which the treatment equipment has been or is to be installed and/or that the conveyance equipment is or will be used exclusively to transport the further treated effluent to an industrial facility for reuse in an industrial process.

I certify that all applicable Federal, State, and local permits and/or approvals for construction and/or operation of the treatment equipment or conveyance equipment have been obtained.

I certify that, to the best of my knowledge, the treatment equipment or conveyance equipment has not previously qualified for a tax credit pursuant to N.J.S.A. 54:10A-5.31 for the applicant or other owner or any previous owner of the equipment.

I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for purposely, knowingly, recklessly or negligently submitting false information.

Signature of Applicant

Date

Print or Type: Name and Position

INSTRUCTIONS FOR COMPLETING FORM DEB - 1

This form should accompany all Determination of Environmental Benefit applications.

1. **General Information** - (items #1 through #4, #6 and #7) Complete the requested applicant and project information.
2. **Other Required Permits/Approvals** (item # 5) - Please list all permits/approvals issued for the subject project.
3. **Signature** (items #8) - The signature must be that of the responsible official of the applicant, in accordance with N.J.A.C. 7:14D-1.2.
4. **Required Additional Information** (item #7) – All items listed must be submitted for the application to be processed. If the application is incomplete, the Department may inactivate and return the application within 30 calendar days of application receipt, in accordance with N.J.A.C. 7:14D-1.2.
5. **Submission of Application** – Please submit completed application to :

Director's Office
Division of Water Quality
N.J. Department of Environmental Protection
PO Box 029
Trenton, NJ 08625-0029
Attn: Reuse Tax Incentives Program

Should you need assistance in completing the application, please call the appropriate phone number listed below:

<p>♦ Bureau of Administration and Management (609) 633-1208 Administrative submittal of DEB application.</p>	<p>♦ Bureau of Point Source Permitting Region 1 (609) 633-3869</p> <p>♦ Bureau of Point Source Permitting Region 2 (609) 292-4860 NJPDES Permitting issues, including guidance on wastewater reuse.</p>
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